DECLARA	MOIT	FOR	UTI	LITY	OR	DESIGN
PATENT	APPLI	CATI	ON	(37	CFR	1.63)

COMPLETE IF KNOWN
Application No:

Attorney Docket No.: 2132.102
Inventor Name: Jackowski et al.

X Decl. Sub. w/Initial Filing

the specification which

__Decl. Sub. after Initial Filing (surcharge

(37 CFR 1.15 (e))

Application No: Filing Date: Group Art Unit: Examiner Name:

As a below named inventor, I hereby declare that:

My residence, post office addr., and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

COMPLEMENT C3 PRECURSOR BIOPOLYMER MARKERS INDICATIVE OF INSULIN RESISTANCE

X is attached hereto OR			
was filed on	As United Sta	tes Application	No. or PCT Intl.
Appln. No.			
applicable).			
I hereby state that I have review	wed and understand	the contents of	the above
identified specification, includ:	ing the claims, as	amended by any a	mendment
specifically referred to above.			
I acknowledge the duty to disclos	se information whic	h is material to	patentability as
defined in 37 CFR 1.56.			
T homely glaim famaian puisuity l	hanafita andan 25 H	· O O 110(-) (3)	
I hereby claim foreign priority }			
application(s) for patent or inve international application which of			
States of America, listed below a			
any foreign application for pater			
application having a filing date			
claimed.	berore that or the	application on	willen priority is
	FOREIGN FILING	PRIORITY	CERTIFIED COPY
NUMBERS:	DATE:	NOT CLAIMED:	
Additional foreign appln. nos. are lattached hereto.	isted on a supplement	al priority data s	heet PTO/SB/02B
I hereby claim the benefit under	35 U.S.C. 119(e) c	of any United Sta	ates provisional
application(s) listed below:		-	-
APPLICATION NUMBER(s):	FILING DATE:		
			rovisional appln.
			listed on a
			ntary priority data
		Sneet PT	O/SB/02B attached.

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DECLARATION - UTILITY or DESIGN PATENT APPLICATION						
I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.						
U.S. PARENT APPLICATION PARENT FILING DATE: PARENT PATENT NO:						
or PCT NUMBER: (if applicable)						
Additional U.S. or PCT international appln.nos. are listed on a supplemental						
priority data sheet PTO/SB/02B attached hereto.						
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: X Customer No: 21917 PLACE CUSTOMER No. BAR CODE LABEL HERMOR						
Registered practitioner(s) name/registration no. listed below.						
NAME: REGISTRATION NO: NAME: REGISTRATION NO:						
Michael A. Slavin 34,016 Joseph Beckman 45,529						
Ferris H. Lander 43,377 Erin Monahan 48,804 C. Fred Rosenbaum 27,110						
c. Fied Rosenbadiii 27,110						
DIRECT ALL CORRESPONDENCE TO: Customer Number OR Or Bar Code Label Correspondence address below						
NAME: McHale & Slavin, P.A.						
ADDRESS: 4440 PGA Blvd.,						
ADDRESS: Suite 402						
CITY: Palm Beach Gardens STATE: FL ZIP: 33410 COUNTRY: U.S. TELEPHONE: (561) 625-6575 PAY: (561) 626 CF72						
COUNTRY: U.S. TELEPHONE: (561) 625-6575 FAX: (561) 625-6572 I hereby declare that all statements made herein of my own knowledge are true and tha all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 17 U.S.C. 100 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR: A Petition has been filed for this unsigned inv						
GIVEN NAME (first and middle [if any]): FAMILY NAME OR SURNAME:						
<u>George</u> Jackowski						
Inventor's signature:						
Residence: 11725 Keele Street R1						
City: Kettleby State: ONTARIO LOG 1J0 Country: CANADA Citizenship: Canadian Post Office Address: 11725 Keele St., R1, Kettleby, Ontario LOG 1J0, CANADA						
Additional inventors are being named on the Supplemental additional inventor(s)						

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NAME OF SECOND INVENTOR: A Petition has	s been filed for this unsigned inv.			
GIVEN NAME (first and middle [if any]):	FAMILY NAME OR SURNAME:			
John	Marshall, PhD			
Inventor's signature:	Date:			
Residence: 95 Parkside Drive				
City: Toronto State: ONTARIO M6R 2V3	Country: CANADA Citizenship: Canadian			
Post Office Address: 95 Parkside Drive, Toronto Ontario M6R 2V3, CANADA				
Additional inventors are being named on the _	Supplemental additional inventor(s			